KOZ 1743

JUN 1 0 2002

510(k) SUMMARY

Submitted For:

COPIOUMED INTERNATIONAL, INC.

6f-1, No. 169-12, Sec. 2 Chang AN East Road Taipei, Taiwan, ROC

Submitted By:

TUCKER & ASSOCIATES

Official Correspondent for Copioumed International, Inc.

JANNA P. TUCKER, President-CEO

198 Avenue de la D'emerald Sparks, NV 89434-9550 Phone: 775-342-2612 Fax: 775-342-2613 E-Mail: Tuckerjan@aol.com

Date of Submission:

20 May 2002

Device Name:

POWDER-FREE POLY-VINYL EXAM GLOVES,

COLOR: YELLOW Class I Device, 80LZA

Proprietary Name:

(Multiple Labels) Powder-Free Poly-Vinyl Exam Gloves,

Color: Yellow

Labels/Labeling:

This device will be marketed to healthcare professionals at Dentist and Doctor Offices, Laboratories, Clinics and Hospitals through its distributors for the intended use.

Intended Use:

A patient examination glove is a disposable device intended for medical purposes that is worn on the examiner's hand or finger to prevent contamination between patient and

examiner.

Substantial Equivalence:

Both in its intended use and/or physical

characteristics, this device is equivalent to devices

currently marketed by U.S. companies. It is **substantially Equivalent** to the devices manufactured by Shanghai Poseidon Plastic Products Company Limited, (K992979)

and Glormed International (K002340)

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Test Results (Means and/or Successful Results:

This device has met or exceeded the following standards and/or tests:

ASTM D 5250-00 ASTM D 5151-00 ASTM D 6124-00 Bio-Burden

Bio-Compatibility:

Dermal Sensitization Primary Skin Irritation

Conclusion:

This device is substantially equivalent to the devices Approved as K992979 and K002340

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Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Copioumed International, Incorporated C/O Ms. Janna P. Tucker Tucker & Associates 198 Avenue De La D' Emerald Sparks, Nevada 89434-9550

Re: K021743

Trade/Device Name: Powder-Free Poly-Vinyl Examination Gloves, Color Yellow

Regulation Number: 880.6250

Regulation Name: Patient Examination Gloves

Regulatory Class: I Product Code: LZA Dated: May 20, 2002 Received: May 28, 2002

Dear Ms. Tucker:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies.

You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050. This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 21 CFR Part 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4618. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours

Timoth A. Ulatowski

Director

Division of Dental, Infection Control and General Hospital Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

INDICATIONS FOR USE

APPLICANT:	COPIOUMED INTERNATIONAL, INC.
510(k) NUMBER:	K021743
DEVICE NAME:	POWDER-FREE POLY-VINYL EXAM GLOVES, COLOR: YELLOW
A patient examination glove is a disposable device intended for medical purposes that is worn on the examiner's hand or finger to prevent contamination between patient and examiner.	
NEEDED)	E BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF e of CDRH, Office of Device Evaluation (ODE)
Conouncia	e of Obtain, Office of Device Evaluation (ODE)
Prescription Use	OR Over-The-Counter Use
(Per 21 CFR 801.109)	(Optional Format 1-2-96)
	(Optional Folimat 1-2-90)
•	Division Sign-Off)
	Division of Dental, Infection Control, and General Hospital Devices
	510(k) Number <u>(2021743</u>